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02-14-01

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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	YOR9-2001-0011US1(8728-
	First Inventor	Martin Franz
	Title	DYNAMIC LANGUAGE MODEL MIXTURES...
	Express Mail Label No.	EL679454109US

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09/782434
02/13/01


APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
3. <input checked="" type="checkbox"/> Specification [Total Pages <input]<br="" type="text" value="36"/> (preferred arrangement set forth below)	a. <input type="checkbox"/> Computer Readable Form (CRF)
- Descriptive title of the invention	b. Specification Sequence Listing on:
- Cross Reference to Related Applications	i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or
- Statement Regarding Fed sponsored R & D	ii. <input type="checkbox"/> paper
- Reference to sequence listing, a table, or a computer program listing appendix	c. <input type="checkbox"/> Statements verifying identity of above copies
- Background of the Invention	
- Brief Summary of the Invention	ACCOMPANYING APPLICATION PARTS
- Brief Description of the Drawings (if filed)	9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))
- Detailed Description	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (when there is an assignee)
- Claim(s)	11. <input type="checkbox"/> English Translation Document (if applicable)
- Abstract of the Disclosure	12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
	13. <input type="checkbox"/> Preliminary Amendment
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <input]<="" td="" type="text" value="4"/> <td>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</td>	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
5. Oath or Declaration [Total Pages <input]<="" td="" type="text" value="2"/> <td>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</td>	15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)
a. <input checked="" type="checkbox"/> Newly executed (original or copy)	16. <input checked="" type="checkbox"/> Other: Associate Power of Attorney.....
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 17 completed)	
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	

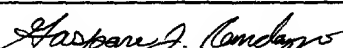
17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. _____

Prior application information. Examiner _____ Group / Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS					
<input type="checkbox"/> Customer Number or Bar Code Label  or <input type="checkbox"/> Correspondence address below					
(Insert Customer No. or Attach bar code label here)					
Name	Frank Chau, Esq.				
Address	F. CHAU & ASSOCIATES, LLP				
	1900 Hempstead Turnpike, Suite 501				
City	East Meadow	State	New York	Zip Code	11554
Country	USA	Telephone	516-357-0091	Fax	516-357-0092

Name (Print/Type)	Gaspare J. Randazzo	Registration No. (Attorney/Agent)	41,528
Signature			Date 2/12/2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 822.00

Complete if Known

Application Number	
Filing Date	February 12, 2001
First Named Inventor	Martin Franz
Examiner Name	
Group Art Unit	
Attorney Docket No.	YOR9-2001-0011US1(8728-481)

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **50-0510/IBM**

Deposit Account Name **IBM/Yorktown Heights**

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

- ☐ Applicant claims small entity status See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Code	Small Entity Code	Fee (\$)	Fee Description	Fee Paid
101	201	355	Utility filing fee	710
106	206	160	Design filing fee	
107	207	245	Plant filing fee	
108	208	355	Reissue filing fee	
114	214	75	Provisional filing fee	

SUBTOTAL (1) (\$ 710.00)

2. EXTRA CLAIM FEES

Total Claims **24** -20** = **4** X **18** = **72**

Independent Claims **3** -3** = **0** X **80** = **0**

Multiple Dependent **270** =

Large Entity Code	Small Entity Code	Fee (\$)	Fee Description
103	203	9	Claims in excess of 20
102	202	40	Independent claims in excess of 3
104	204	135	Multiple dependent claim, if not paid
109	209	40	** Reissue independent claims over original patent
110	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 72.00)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Code	Small Entity Code	Fee (\$)	Fee Description	Fee Paid
105	205	65	Surcharge - late filing fee or oath	
127	227	25	Surcharge - late provisional filing fee or cover sheet	
139	239	130	Non-English specification	
147	247	2,520	For filing a request for ex parte reexamination	
112	212	920*	Requesting publication of SIR prior to Examiner action	
113	213	1,840*	Requesting publication of SIR after Examiner action	
115	215	55	Extension for reply within first month	
116	216	195	Extension for reply within second month	
117	217	445	Extension for reply within third month	
118	218	695	Extension for reply within fourth month	
128	228	945	Extension for reply within fifth month	
119	219	155	Notice of Appeal	
120	220	155	Filing a brief in support of an appeal	
121	221	135	Request for oral hearing	
138	238	1,510	Petition to institute a public use proceeding	
140	240	55	Petition to revive - unavoidable	
141	241	620	Petition to revive - unintentional	
142	242	620	Utility issue fee (or reissue)	
143	243	220	Design issue fee	
144	244	300	Plant issue fee	
122	222	130	Petitions to the Commissioner	
123	223	50	Petitions related to provisional applications	
126	226	240	Submission of Information Disclosure Stmt	
581	281	40	Recording each patent assignment per property (times number of properties)	40
146	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	
179	279	355	Request for Continued Examination (RCE)	
169	269	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 40.00)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Gaspare J. Randazzo	Registration No. (Attorney/Agent)	41,528	Telephone	(516) 357-0091
Signature	<i>Gaspare J. Randazzo</i>	Date	2/12/2001		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Assistant Commissioner for Patents
Washington, D.C. 20231
Sir:

ATTORNEY DOCKET: YOR9-2001-0011US1(8728-481)
Date: February 12, 2001
Express Mail Label: EL679454109US
Date of Deposit: February 12, 2001

15996 U.S. PRO
09/782434
02/13/01

Transmitted herewith for filing is the Patent Application of:

Inventors: MARTIN FRANZ AND PEDER ANDREAS OLSEN

For: DYNAMIC LANGUAGE MODEL MIXTURES WITH HISTORY-BASED BUCKETS

Enclosed are: [X] 25 sheets of specification; [X] 1 sheet(s) of Abstract; [X] 10 sheet(s) of claims; [X] 4 sheet(s) of drawing(s);

[X] An assignment of the invention to: International Business Machines Corporation, Armonk, New York, with Recordation Form.

[X] Declaration and Power of Attorney.

[] A certified copy of a _____ application, from which priority under Title 35 USC §119 is claimed.

[X] Associate Power of Attorney.

The filing fee has been calculated as shown below:

(Col. 1)		(Col. 2)	OTHER THAN A SMALL ENTITY	
FOR:	NO. FILED	NO. EXTRA	RATE	FEE
BASIC FEE				\$710.00
TOTAL CLAIMS	24-20 =	4	X \$18 =	72.00
INDEP CLAIMS	3-3 =	0	X \$80 =	0
MULTIPLE DEPENDENT CLAIMS PRESENTED			+ 270 =	
If the difference in Col. 1 is less than zero, enter "0" in Col. 2.			TOTAL	\$782.00

[] A check in the amount of \$_____ to cover the [] filing fee(s), [] recording fee is enclosed.

[X] Please charge my Deposit Account No. 50-0510/IBM (Yorktown Heights) in the amount of \$782.00.

[X] The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0510/IBM (Yorktown Heights). A duplicate copy of this sheet is enclosed.

[X] Any additional filing fees required under 37 CFR 1.16.

[X] Any patent application processing fees under 35 CFR 1.17.

Respectfully submitted,

By: Gaspere J. Randazzo
Gaspere J. Randazzo
Registration No. 41,528

Please address all
correspondence to:
F. CHAU & ASSOCIATES, LLP
1900 Hempstead Tpke., Suite 501
East Meadow, NY 11554
Tel: (516) 357-0091
Fax: (516) 357-0092

Attorney for:
IBM Corporation
Intellectual Property Law Dept.
P.O. Box 218
Yorktown Heights, NY 10598

CERTIFICATION UNDER 37 C.F.R. §1.10

I hereby certify that this Application transmittal and documents referred to as enclosed are being deposited with the United States Postal Service on this date February 12, 2001 in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number EL679454109US addressed to: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

Gaspere J. Randazzo
Gaspere J. Randazzo